

CHARGE OF DISCRIMINATION

This form is affected by the Privacy Act of 1974. See enclosed Privacy Act Statement and other information before completing this form.

Charge Presented To: Agency(ies) Charge No(s):

☐ FEPA☒ EEOC**490-2013-01298****Exhibit #****15****Tennessee Human Rights Commission**

and EEOC

State or local Agency, if any

Name (indicate Mr., Ms., Mrs.)

Ms. Lataundra M. Shinault

Home Phone (Incl. Area Code)

(901) 458-8281

Date of Birth

-1971

Street Address

City, State and ZIP Code

1646 Jay Cove, Memphis, TN 38127

Named is the Employer, Labor Organization, Employment Agency, Apprenticeship Committee, or State or Local Government Agency That I Believe Discriminated Against Me or Others. (If more than two, list under PARTICULARS below.)

Name

CITY OF MEMPHIS FIRE DEPARTMENT

No. Employees, Members

500 or More

Phone No. (Include Area Code)

(901) 458-8281

Street Address

City, State and ZIP Code

4255 Raines Road, Memphis, TN 38111

Name

City Of Memphis,

No. Employees, Members

500 or more

Phone No. (Include Area Code)

Street Address

City, State and ZIP Code

125 North Main Street, Memphis, TN 38103

DISCRIMINATION BASED ON (Check appropriate box(es).)

☐ RACE ☐ COLOR ☒ SEX ☐ RELIGION ☐ NATIONAL ORIGIN

☒ RETALIATION ☐ AGE ☐ DISABILITY ☐ GENETIC INFORMATION

☐ OTHER (Specify)

DATE(S) DISCRIMINATION TOOK PLACE

Earliest

Latest

01-01-2008**03-26-2013**☐ CONTINUING ACTION

THE PARTICULARS ARE (If additional paper is needed, attach extra sheet(s)):

I was hired on July 26, 2004 as a Firefighter.

In 2008 I was subjected to sexual harassment from Lt. W. Edwards, a male. After I complained of the sexual harassment internally, I have been subjected continuous retaliation in that I have been scheduled to work with Edwards. However, I have avoided him at all cost which includes, but not limited to requesting other employees to work for me. In addition, I have been yelled at by mgmt. officials and made to perform training duties. In 2009 and 2010, I was issued unmerited write-ups.

Recently, on March 26, 2013 I received two written reprimands and advised that I needed to seek the assistance of EAP. In addition, I believe that the schedules are being done by Edwards who constantly assigns me to work with him. I believe that this is an attempt to subject me to harassment and intimidation for my sexual harassment complaint.

Throughout the entire process, I have been told by ranking officers that I need to follow the change of command for complaints but no actions done to resolve the matter. I have been told there was no one else to complain to in an effort to keep me from seeking resolution and complaining to others.

I believe that I have been discriminated against because of my sex, female (sexual harassment) and retaliated against for complaining about the sexual harassment in violation of Title VII of the Civil Rights Act of 1964, as amended.

I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies of my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.

I declare under penalty of perjury that the above is true and correct.

NOTARY - When necessary for State and Local Agency Requirements

I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief.

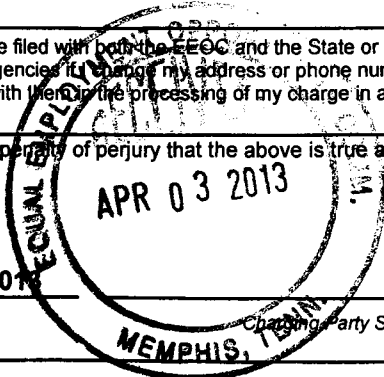
SIGNATURE OF COMPLAINANT

SUBSCRIBED AND SWORN TO BEFORE ME THIS DATE
(month, day, year)

Apr 03, 2013

Date

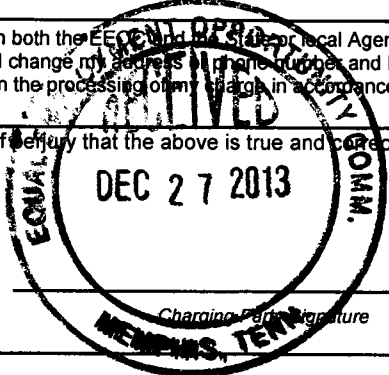
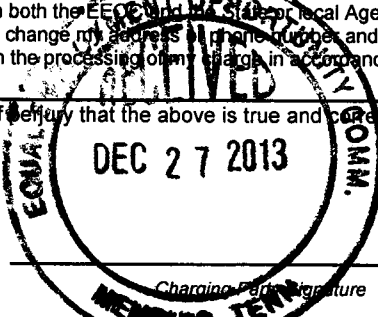
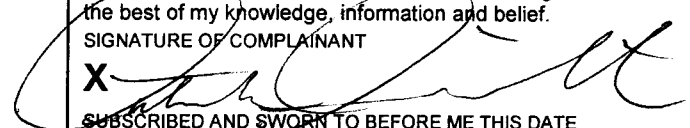
Complainant Signature



[Signature]
April 3, 2013, 8:00 AM

EEOC Form 5 (11/09)

CHARGE OF DISCRIMINATION		Charge Presented To: Agency(ies) Charge No(s):	
This form is affected by the Privacy Act of 1974. See enclosed Privacy Act Statement and other information before completing this form.		<input type="checkbox"/> FEPA <input checked="" type="checkbox"/> EEOC	
Tennessee Human Rights Commission		490-2014-00562	
State or local Agency, if any			
Name (indicate Mr., Ms., Mrs.)		Home Phone (Incl. Area Code)	Date of Birth
Ms. Lataundra M. Shinault		(901) 458-8281	-1971
Street Address		City, State and ZIP Code	
1646 Jay Cove, Memphis, TN 38127			
Named is the Employer, Labor Organization, Employment Agency, Apprenticeship Committee, or State or Local Government Agency That I Believe Discriminated Against Me or Others. (If more than two, list under PARTICULARS below.)			
Name		No. Employees, Members	Phone No. (Include Area Code)
CITY OF MEMPHIS FIRE DEPARTMENT		500 or More	(901) 527-1400
Street Address		City, State and ZIP Code	
125 North Main Street, Memphis, TN 38103			
Name		No. Employees, Members	Phone No. (Include Area Code)
Street Address		City, State and ZIP Code	
DISCRIMINATION BASED ON (Check appropriate box(es).)		DATE(S) DISCRIMINATION TOOK PLACE	
<input type="checkbox"/> RACE <input type="checkbox"/> COLOR <input checked="" type="checkbox"/> SEX <input type="checkbox"/> RELIGION <input type="checkbox"/> NATIONAL ORIGIN <input checked="" type="checkbox"/> RETALIATION <input type="checkbox"/> AGE <input checked="" type="checkbox"/> DISABILITY <input type="checkbox"/> GENETIC INFORMATION <input type="checkbox"/> OTHER (Specify)		Earliest Latest 12-10-2013 12-17-2013 <input type="checkbox"/> CONTINUING ACTION	
THE PARTICULARS ARE (If additional paper is needed, attach extra sheet(s)):			
<p>I filed a previous charge of discrimination on April 3, 2013, alleging sex discrimination and retaliation.</p> <p>Since the filing of the first charge, I have become disabled due to the situation from the employer that has caused me to be off work. I received documentation stating that my resignation was effective May 26, 2013; however, I was on leave under FMLA. I remained on FMLA and extended leave until I was discharged on December 17, 2013. In addition, my extended leave request was not granted.</p> <p>I believe that I was not granted additional leave and discharged because the above employer did not want to resolve my previous charge issues.</p> <p>I believe that I have been retaliated against for filing a previous charge of discrimination (EEOC Charge No.: 490-2013-01298) in violation of Title VII of the Civil Rights Act of 1964, as amended and discriminated against due to my disability in violation of the Americans with Disabilities Act Amendments Act.</p>			

I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address, phone number, and I will cooperate fully with them in the processing of my charge in accordance with their procedures. I declare under penalty of perjury that the above is true and correct. <div style="text-align: center;">  </div> <div style="display: flex; justify-content: space-between;"> <div> Dec 27, 2013 <small>Date</small> </div> <div> <small>Charging Party Signature</small>  </div> </div>	NOTARY – When necessary for State and Local Agency Requirements I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief. SIGNATURE OF COMPLAINANT <input checked="" type="checkbox"/>  SUBSCRIBED AND SWORN TO BEFORE ME THIS DATE <small>(month, day, year)</small> Dec. 27, 2013, G. Allen Hammond, Sr. Investigator
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